


## APPLICATION DATA SHEET

Electronic Version v14

Stylesheet Version v14.0

<b>Title of Invention</b>	SYSTEM AND METHOD FOR SYNCHRONIZING DIVIDE-BY COUNTERS	
Application Type : regular, utility Attorney Docket Number : BUR920030068US1		
Correspondence address: Customer Number: 21918 		
<b>Inventors Information:</b>  <u>Inventor 1:</u> <b>Applicant Authority Type:</b> Inventor <b>Citizenship:</b> DE <b>Given Name:</b> Rolf <b>Family Name:</b> Hilgendorf <b>Residence:</b> <b>City of Residence:</b> Boeblingen <b>Country of Residence:</b> DE <b>Address-1 of Mailing Address:</b> Herrenalber Str. 44, D-71034 <b>Address-2 of Mailing Address:</b> <b>City of Mailing Address:</b> Boeblingen <b>State of Mailing Address:</b> <b>Postal Code of Mailing Address:</b> <b>Country of Mailing Address:</b> DE <b>Phone:</b> <b>Fax:</b> <b>E-mail:</b>  <u>Inventor 2:</u> <b>Applicant Authority Type:</b> Inventor <b>Citizenship:</b> DE <b>Given Name:</b> Jens <b>Family Name:</b> Kuenzer <b>Residence:</b> <b>City of Residence:</b> Leinfelden-Echterdingen		

**Country of Residence:** DE  
**Address-1 of Mailing Address:** Stettener Hauptstrasse 57, D-70771  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Leinfelden-Echterdingen  
**State of Mailing Address:**  
**Postal Code of Mailing Address:**  
**Country of Mailing Address:** DE  
**Phone:**  
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**E-mail:**

Inventor 3:

**Applicant Authority Type:** Inventor  
**Citizenship:** DE  
**Given Name:** Cedric  
**Family Name:** Lichtenau  
**Residence:**  
**City of Residence:** Boeblingen  
**Country of Residence:** DE  
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**Address-2 of Mailing Address:**  
**City of Mailing Address:** Boeblingen  
**State of Mailing Address:**  
**Postal Code of Mailing Address:**  
**Country of Mailing Address:** DE  
**Phone:**  
**Fax:**  
**E-mail:**

Inventor 4:

**Applicant Authority Type:** Inventor  
**Citizenship:** DE  
**Given Name:** Thomas  
**Family Name:** Pflueger  
**Residence:**  
**City of Residence:** Leinfelden  
**Country of Residence:** DE  
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**Address-2 of Mailing Address:**  
**City of Mailing Address:** Leinfelden  
**State of Mailing Address:**  
**Postal Code of Mailing Address:**

**Country of Mailing Address:** DE

**Phone:**

**Fax:**

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Inventor 5:

**Applicant Authority Type:** Inventor

**Citizenship:** US

**Given Name:** Mathew

**Middle Name:** I.

**Family Name:** Ringler

**Residence:**

**City of Residence:** Burlington

**State of Residence:** VT

**Country of Residence:** US

**Address-1 of Mailing Address:** 37 Gove Court

**Address-2 of Mailing Address:**

**City of Mailing Address:** Burlington

**State of Mailing Address:** VT

**Postal Code of Mailing Address:** 05401

**Country of Mailing Address:** US

**Phone:**

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Inventor 6:

**Applicant Authority Type:** Inventor

**Citizenship:** US

**Given Name:** Gerard

**Middle Name:** M.

**Family Name:** Salem

**Residence:**

**City of Residence:** Essex Junction

**State of Residence:** VT

**Country of Residence:** US

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**Address-2 of Mailing Address:**

**City of Mailing Address:** Essex Junction

**State of Mailing Address:** VT

**Postal Code of Mailing Address:** 05452

**Country of Mailing Address:** US

**Phone:**

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**E-mail:**

Inventor 7:

**Applicant Authority Type:** Inventor  
**Citizenship:** US  
**Given Name:** Peter  
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**Family Name:** Sandon  
**Residence:**  
**City of Residence:** Essex Junction  
**State of Residence:** VT  
**Country of Residence:** US  
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**Address-2 of Mailing Address:**  
**City of Mailing Address:** Essex Junction  
**State of Mailing Address:** VT  
**Postal Code of Mailing Address:** 05452  
**Country of Mailing Address:** US  
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Inventor 8:

**Applicant Authority Type:** Inventor  
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**Middle Name:** J.  
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**City of Residence:** Monkton  
**State of Residence:** VT  
**Country of Residence:** US  
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**City of Mailing Address:** Monkton  
**State of Mailing Address:** VT  
**Postal Code of Mailing Address:** 05443  
**Country of Mailing Address:** US  
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Inventor 9:

**Applicant Authority Type:** Inventor  
**Citizenship:** DE  
**Given Name:** Ulrich  
**Family Name:** Weiss  
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**City of Residence:** Holzgerlingen  
**Country of Residence:** DE  
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**Address-2 of Mailing Address:**  
**City of Mailing Address:** Holzgerlingen  
**State of Mailing Address:**  
**Postal Code of Mailing Address:**  
**Country of Mailing Address:** DE  
**Phone:**  
**Fax:**  
**E-mail:**

Attorney Information:

practitioner(s) at Customer Number:

21918



as our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Assignee 1:

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